

RECEIVED

DEC 13 2010

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

D. SEC. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER <i>The Haven Review</i>		2. DATE <i>9-22-2010</i>	
3. FREQUENCY OF ISSUE <i>Weekly</i>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <i>52</i>	3B. ANNUAL SUBSCRIPTION PRICE \$ <i>In-state - 32.00</i> <i>out-of-state - 35.00</i>	
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <i>P.O. Box 37, 69 2nd Ave. E., Haven, SD 57450-0037</i>			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <i>P.O. Box 37, 69 2nd Ave. E., Haven, SD 57450-0037</i>			
6. FULL NAME OF PUBLISHER: <i>Haven Media, Inc. P.O. Box 37, 69 2nd Ave. E. Haven, SD 57450</i> <i>Kyle Krueger - Pres.</i>			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)			
FULL NAME <i>Kyle Krueger</i>		COMPLETE MAILING ADDRESS <i>288 3 Ave. W. Haven, SD 57450</i>	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) <i>Plains Commerce Bank - 220 Main Street, Haven, SD 57450</i>			
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE	
A. TOTAL NO. COPIES (Net Press Run)	<i>900</i>	<i>900</i>	
B. PAID AND/OR REQUESTED CIRCULATION			
1. Sales through dealers and carriers, street vendors and counter sales.	<i>100</i>	<i>65</i>	
2. Mail Subscription (Paid and or requested)	<i>750</i>	<i>641</i>	
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	<i>850</i>	<i>706</i>	
D. FREE DISTRIBUTION			
1. BY MAIL, CARRIER OR OTHER MEANS	<i>9</i>	<i>9</i>	
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	<i>8</i>	<i>8</i>	
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	<i>9</i>	<i>9</i>	
F. COPIES NOT DISTRIBUTED			
1. Office use, left over, unaccounted, spoiled after printing	<i>41</i>	<i>185</i>	
2. Return from News Agents	<i>0</i>	<i>0</i>	
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	<i>900</i>	<i>900</i>	

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Danika Hulse

(Signature)

Editor/Manager

(Title)

State of South Dakota)

County of *Edmunds*)

(Seal)

Sworn to before me this *22* day of *September* 20 *10**John Ken*

Notary Public

My commission expires: *08-19-15*

Bill & Gloria Quenwald

15433 316 Ave., Hoven, SD 57450

Jay Quenwald

15533 316 Ave., Hoven, SD 57450

Royce Hackel

P.O. Box 31, Hoven, SD 57450